2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43832

FILED Apr 18, 2006 Secretary of State

Entity Name: ROYAL RIDGE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 8009 SOUTH ORANGE AVENUE ORLANDO, FL 328096711 US **Current Mailing Address: New Mailing Address:** LELAND MANAGEMENT 8009 SOUTH ORANGE AVE ORLANDO, FL 32809 FEI Number: 59-3191654 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LELAND MANAGEMENT, INC. 8009 S. ORANGE AVE. ORLANDO, FL 32765 The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete ANDREWS, KATHERINE ANDREWS, KATHERINE Name: Name: 157 HIGRIDGE DRIVE Address: 157 HIGH RIDGE DRIVE Address: City-St-Zip: DAVENPORT, FL 33837 City-St-Zip: DAVENPORT, FL 33837 Title: Title: () Delete () Change () Addition PANDOLFO, CANDACE Name: Name: Address: 3778 HUNTWICK BLVD Address: City-St-Zip: DAVENPORT, FL 33837 City-St-Zip: Title: (X) Change () Addition

 Title:
 T
 () Delete

 Name:
 HEARN, DIANNE

 Address:
 1019 BELVAIR DRIVE

 City-St-Zip:
 DAVENPORT, FL 33837

Title: S () Delete Name: ORTIZ, WANDA

Address: 0RTIZ, WANDA
Address: 103 HIGHRIDGE DRIVE
City-St-Zip: DAVENPORT, FL 33837

 Title:
 D
 () Delete

 Name:
 BRYANT, LLOYD

 Address:
 1012 BELVAIR DRIVE

 City-St-Zip:
 DAVENPORT, FL 33837

Title: () Delete

Name: Address: City-St-Zip: Title: D (X) Change () Addition

ORTIZ, WANDA

103 HIGH RIDGE DRIVE

DAVENPORT, FL 33837

FITZSIMMONS, DAVID

3213 HUNTWICKE BLVD

DAVENPORT, FL 33837

(X) Change () Addition

 Name:
 BELLAS, IRENE

 Address:
 619 ROLLINS DRIVE

 City-St-Zip:
 DAVENPORT, FL 33837

Title: D () Change (X) Addition

Name: GRAVES, DAVID
Address: 3101 HUNTWICKE BLVD.
City-St-Zip: DAVENPORT, FL 33837

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Title:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

SIGNATURE: KATHERINE ANDREWS P 04/18/2006